Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

CLAIMS AS FILED - PART							s	SMALL ENTITY			OTHER	OTHER THAN	
-			(Column 1)		(Column 2)		, 1	TYPE		OR	OR SMALL ENTIT		
TOTAL CLAIMS			.12		SCORE OF ST		lΓ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			/2 minus 20=		. 0		Ιſ	X\$ 9=		OR	X\$18=		
IN	DEPENDENT C	2 minus 3 =		. 0		l t	X42≂		OB	X84=			
MULTIPLE DEPENDENT CLAIM PRESENT							t	+140=	 -	OR	+280=		
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	L	TOTAL	 -	OR	TOTAL	70:0	
9-24-63 (Column 1) (Column						(Column 3)		SMALL	ENTITY	OR	OTHER	THAN	
AMENDMENTA	- N 12	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	
Š	Total	.15	Minus	2	5	= 9		X\$ 9=	2	OFI A	X\$18=	,	
AME	Independent	.2	Minus	***	3	= Ø	1	X42=	11		X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	7	Z _B	+280=		
							L	TOTAL		OR	TOTAL ADDIT FEE		
		(Column 1)		(Colur	nn 21	(Column 3)	A	DOIT FEE		1	ADDIT FEE	·	
AMENDMENT B	r di	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	\prod	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	
	Total		Minus	**		-	1	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	1	X42=	52.1	OR	X84=	14-14	
Ľ	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDENT	CLAIM		!	+140=		OB	+280=		
							L	TOTAL			TOTAL		
							A	DDIT, FEE		OR	ADDIT. FEE	L	
	3.5.5.5.3.20	(Column 1)	William State West	(Colur HIGH		(Column 3)	1 -						
AMENDMENT C	Septem	REMAINING AFTER AMENDMENT		PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	
NDN	Total		Minus	**		н	П	X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		×	1 h	X42=			X84=	1	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A46=		OR	X042		
٠,	f the entry in colu	mn 1 is less than th	ne entry in colu	mn 2 write	*O* in col	kuma 2	L	+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3. "If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter '20' "If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter '30' ADDIT FEE										OR	ADDIT FEE	L	
	The "Highest Nurr	ber Previously Pai	d For" (Total or	Independe	ent) is the	highest numbe	r foun	od in the app	od alaingore	x in co	oloma 1		
FORM	PTO-875 /Bev 12	2021 115.6	Comment Printing	Office 2003	499.46477	011	Dates	t and Traden	ank Office U	S DE	PARTMENT O	FCOMMER	